



Finding Hope in Midst of Chaos: COVID-19

Salim Surani^{1*} and Iqbal Ratnani²

¹Adjunct Clinical Professor of Medicine, Texas A&M University, Texas, USA

²Assistant Professor, Weil Cornell College of Medicine, Houston Methodist, Houston, Texas, USA

***Corresponding Author:** Salim Surani, Adjunct Clinical Professor of Medicine, Texas A&M University, Texas, USA.

Received: April 24, 2020

Published: May 02, 2020

© All rights are reserved by **Salim Surani and Iqbal Ratnani.**

Over the past 3 months, the world has seen more than 2.5 million patients infected with COVID-19 and more than 180,000 people who have died. The number seems to be a far underestimation of the number of people who have been infected or who have died due to the lack of testing in both developed and developing countries. In the past three months, the world has seen the health care system of the most developed countries in the world crumble. The developing countries are now feeling the weight as the world has come to a sudden halt. The travel, tourism and oil industries have collapsed. Fear has taken over the facts. Issues of health versus economy have taken the center stage of all modern debate. The world has observed simulation models in the extremes as no measure for protection would have been accepted as a consensus. The nations who were thought and perceived to be invincible are challenged by an enemy who is much smaller than them, at a size of only 70 - 90 nanometers.

This invisible virus has now become the global enemy and the world is waging war against it. In the modern era, politics, a blame game, and emotions are at its highest. Media has also taken this war to the forefront, each individual sharing opinions based on whose side they are on and whose thought process they follow. Experts from both sides are making predictions on how to fight this war based on the past experiences of different pandemics, however, they have little explicit experience as this is a novel enemy.

The developing countries had taken the ostrich policy initially, but with the 70 - 90 nm enemy at their doorstep, they started fighting this battle by creating strict social distancing measures and lockdown requirements. This created a situation where the people and the government had to take a tough decision in these developing countries: let the people die of hunger or COVID-19?

Developed countries are creating stimulus packages to keep the economy from sinking. Medical aid and help to the developing countries as well as the World Health Organization have all been curtailed. The question arises that if we don't do much, can the second wave from developing countries make it back to the developed countries, and would the developed countries' health care and financial system be able to survive that? Is this a one nation crisis or global crisis? Is this an individual country's fight or is this a global fight where we must work as a team against a common enemy?

The COVID-19 pandemic has challenged our healthcare system, public healthcare system, national ego, viability and sustainability. The globe collectively and the United States of America (USA) individually, have faced many challenges pertaining to testing, personal protective equipment (PPE), supplies and hospital and intensive care unit beds. The government and public health authorities have lowered the standard for protecting healthcare and frontline workers to barebone. Feeling the pressure from the media and public, the governments have authorized testing kits and tools to be deployed in record time by lowering the standard for approval, leading to the secondary challenge of unreliable and poorly controlled testing. The quality, sensitivity and specificity were compromised in an attempt to curb the public fear and help rapid diagnosis. The vulnerabilities of the USA, Italy, the UK, and the developing nations as well, were exposed as the world saw their healthcare and public health system collapse due to their decade long budget cuts. They were understaffed to take on this pandemic and a fight of this magnitude. The hospital systems vulnerabilities were also exposed, as over the years of controlling the healthcare cost, they were found to be operating very lean with no reserve.

Healthcare professionals trying to save their patients were willing to try any medications or therapy which they could get their hands on to help their patients. In the medicine world, overnight, everyone became the expert on COVID-19 and every journal wanted to be the first in the race for publishing (a race found to exist in the media and social media as well), leading to very preliminary data with lots of confounders being published and patient care driven based on that marginal data. The initial data and theories were refuted and replaced by others. What we had learned in the past about the management of acute respiratory distress syndrome turned out to be the wrong management for COVID-19.

The managing tactics are being changed in the middle of the crisis, not knowing if they will even prove to be effective. The fear of COVID-19 and the hype around the delay in testing time initially, have led to more harm than good as most diagnostic and therapeutic test results were delayed. The attributable risk with the observed/expected death has been ignored as it would decrease the hype and was not felt to be an attention grabber. Moreover, with less death attributable, that means less crisis and less funding. In short, we all are in war with total chaos and our strategies being changed

on a daily basis. Some strategies based on facts, some based on fear and some for sure based on political scores or pressure.

However, in the midst of chaos, the world saw hope. The health-care providers, grocery store workers, cleaning crew, firefighters, law enforcement officers, military and many others showed their commitment to save lives. They showed signs of solidarity and pride in taking care of the sick individuals. Healthcare workers were there to hold the arms of patients who were sick or dying in isolation. They also witnessed their co-workers getting ill and dying. The healthcare professionals started volunteering themselves to take care of the patients and fight this war. The medical professionals, corporates, medical societies, government, medical journals and laboratories worked at a pace the world had never seen before to help healthcare providers with PPE, medical supplies, diagnostic testing, real time management information and working on vaccines at record pace (to name a few). The population at large has come together and showed their love and empathy. Volunteerism and professionalism were seen at their best. It is this hope, unity, passion, volunteerism, care, compassion, faith and belief that will hopefully help us overcome this and come out of this even stronger. It's a global fight and we need to work together as a team globally.

Assets from publication with us

- Prompt Acknowledgement after receiving the article
- Thorough Double blinded peer review
- Rapid Publication
- Issue of Publication Certificate
- High visibility of your Published work

Website: <https://www.actascientific.com/>

Submit Article: <https://www.actascientific.com/submission.php>

Email us: editor@actascientific.com

Contact us: +91 9182824667